

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

Citizens for Turner

ADDRESS (number and street)

120 W 2nd Street

Suite 1510

Dayton

OH

45402-1603

☐ Check if different
than previously
reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼

C C00373001

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)

OH

03

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

☐

April 15 Quarterly Report (Q1)

☐

July 15 Quarterly Report (Q2)

☐

October 15 Quarterly Report (Q3)

☒

January 31 Year-End Report (YE)

☐

Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12S)

Election on

M M / D D / Y Y Y Y
03 / 06 / 2012in the
State of

OH

(c) 30-Day POST-Election Report for the:

☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

M M / D D / Y Y Y Y
03 / 06 / 2012in the
State of

OH

5. Covering Period

M M / D D / Y Y Y Y
10 / 01 / 2011

through

M M / D D / Y Y Y Y
12 / 31 / 2011

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Michael Berning

Signature of Treasurer

Michael Berning

[Electronically Filed]

Date

M M / D D / Y Y Y Y
01 / 31 / 2012

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3**
(Revised 02/2003)